

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2005 8:00 am
Secretary of State

01-31-2005 90137 019 ***150.00

DOCUMENT # P01000106615	
1. Entity Name R.A.O. ELEVATOR INSPECTION, INC.	

Principal Place of Business 82 HOLLYBERRY COURT NORTH FORT MYERS, FL 33917	Mailing Address 82 HOLLYBERRY COURT NORTH FORT MYERS, FL 33917
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50008882

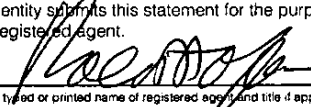


2. Principal Place of Business 838 HOLLYBERRY COURT	3. Mailing Address 838 HOLLYBERRY COURT
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State NORTH FORT MYERS FL.	City & State NORTH FORT MYERS. FL
Zip 33917	Country
Zip 33917	Country

01282005 Chg-P CR2E034 (10/03)

4. FEI Number 65-1151595		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent OFFERMANN, ROBERT A 82 HOLLYBERRY COURT NORTH FORT MYERS, FL 33917		7. Name and Address of New Registered Agent Name OFFERMANN, ROBERT A. Street Address (P.O. Box Number is Not Acceptable) 838 HOLLYBERRY COURT City NORTH FORT MYERS FL Zip Code 33917

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  DATE _____

Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P OFFERMANN, ROBERT A 82 HOLLYBERRY COURT NORTH FORT MYERS, FL 33917 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P OFFERMANN, ROBERT A. 838 HOLLYBERRY COURT NORTH FORT MYERS FL. 33917 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V OFFERMANN, KAROLYN J 82 HOLLYBERRY COURT NORTH FORT MYERS, FL 33917 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V OFFERMANN, KAROLYN J 838 HOLLYBERRY COURT NORTH FORT MYERS FL, 33917 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  1/20/05 239-543-1503

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #